

DEPARTMENT OF SOCIAL SERVICES

Community Care Licensing Division
Statewide Children's Residential Program
Out-of-State Certification Unit

**OUT-OF-STATE ANNUAL REVIEW****GIBAULT**

**6301 South US HWY 41
Terre Haute, Indiana 47802**

FACILITY VISIT DATE(S): June 6, 2006

OUT-OF-STATE CERTIFICATION UNIT (OSCU) STAFF MEMBER:

Olaniyan Akyeem, Associate Governmental Program Analyst

PURPOSE OF VISIT:

Gibault is seeking re-certification with the State of California, Department of Social Services, Community Care Licensing Division, Out-of-State Certification Unit. The purpose of this visit is to verify the facility is in compliance with California Group Home licensing standards in order to re-certify the facility.

CALIFORNIA PLACING AGENCIES:

Currently, San Diego County is the only California representative involved with placement at this time.

FACILITY AND PHYSICAL PLANT OVERVIEW:

The main campus in Terre Haute occupies 60 of the Gibault-owned 347 acres of farm, woodland, streams and ponds. The residential capacity is 147 children and adolescents between the ages of 8 and 18. The main campus is located three miles south of Terre Haute. Gibault has regional offices in Gary, Indiana and Evansville, Indiana.

Gibault's eight (8) bed Group Home is located at: 1141 South Center St. in Terre Haute Indiana. The community based group home operates largely as a satellite facility of the main campus program where clients are typically transitioned in from. The group home's physical structure is that of a single family home dwelling in a residential neighborhood setting near the Indiana State University campus. Like most others in the area, the home was built in the 1930's of Victorian style architecture and is quite large and grand in nature. The home's primary living space comprises of two levels: Downstairs - entry/dining room, screened porch area utilized largely for private visiting space and telephone use, very large living/family room; bathroom and large remodeled/modernized kitchen with an eating area where meals are traditionally served. Upstairs is comprised of three client bedrooms; a very large bathroom with multiple sinks, commodes and stall showers; and a large staff lounge/office/meeting space with a full attached bathroom. Additionally, the home has a full basement and attic. Both are partially finished but not utilized for client living space. Rather, the basement houses laundry facilities and home supply storage; the attic - additional storage space. Entry into both areas is through locked

doors, rendering them inaccessible to clients without the proper key and staff permission and/or direct supervision. The home has a modest sized front lawn with concrete walkway. The backyard is more generously sized and is partially nicely landscaped lawn and flower beds, partially poured and finished concrete patio and basketball facilities

The physical plant overview revealed no issues of concern. The home appeared to be operating within compliance of the California licensing standards. All rooms provided adequate living space, and plenty of games and recreational activity space. The kitchen, bathrooms, bedrooms and exterior were observed to be clean and in good repair.

FIRE CLEARANCE:

Fire inspections are conducted annually at the group home. The State of Indiana, State Emergency Management Agency, and Department of Fire and Building Services has oversight responsibilities relating to this area. A copy of the group home's last fire inspection conducted on November 8, 2005 was reviewed and revealed no areas of violations.

INDIANA LICENSING AND COMPLAINTS:

The community base group home is licensed and regulated by the State of Indiana, Family and Social Services Administration, Division of Family and Children, Bureau of Family Protection and Preservation, Residential Licensing. For certification purposes, Gibault has requested that only the community based eight (8) bed group home be certified for California placements.

The last facility evaluation was conducted in December of 2005. The results of the review revealed five areas of deficiencies related to personnel and client records. A plan of correction was made on January 24, 2006.

On July 12, 2006, contact was made with the Indiana licensing representative for Gibault. The licensing representative reports that Gibault has not had any substantiated complaints in the last year and the program is currently operating under full licensing status.

HEALTH DEPARTMENT CLEARANCES:

Gibault is not regulated by the local State and/or County Health Departments. Because the group home is a residential dwelling and all meals are prepared in home, they are exempt from the process. However, all food services are regulated under the State of Indiana, Family and Social Services Administration, Division of Family and Children, Bureau of Family Protection and Preservation, Residential Licensing, on an annual basis.

ADMINISTRATION AND PLAN OF OPERATION:

Gibault provided a valid copy of their licenses for their community based Group Home. Administrative review revealed no issues related to intake procedures, operating outside of licensing capacity. Staff to child ratios was not an issue of concern to staff interviewed.

PROGRAM REVIEW AND CHANGES (If applicable):

Gibault has not had any significant program changes or additions to the existing program in the last year.

EMERGENCY INTERVENTION PLAN (EIP) / INCIDENT REPORTS (IR):

Gibault continues to utilize the Therapeutic Crisis Intervention (TCI). It is a well known method within the group home industry that was created by the Residential Child Care Project at Cornell University. Gibault presented a well written Crisis Intervention Policy created in 2001, and last updated January 6, 2004. Physical intervention is discouraged and used only when a client is a danger to himself/herself or others, and to protect individuals from harming themselves or others. Personnel are trained to use the least restrictive, safest, and most effective method. Physical restraint is initiated only if all less restrictive measures have been proven ineffective.

A review of Gibault's incident reports was conducted prior to this visit. The review revealed a deficiency in the duty to report special incidents as described in the California Incident Reporting Guidelines and Requirements for out-of-state providers. Per California Family Code Section 7911.1 (a), certified out-of-state group homes are required to comply with reporting requirements for each child in care regardless of whether he/she is a California placement. (This issue is addressed in the Plan of Correction.)

PERSONNEL AND CLIENT FILE REVIEW

Personnel and client file reviews revealed no issues of concern.

CLIENT(S) AND PERSONAL RIGHTS (REVIEWED):

Upon admission, each child is informed of his/her personal rights. The child's rights statement document is signed by the child and his/her authorized representative and placed in the child's file.

MEDICAL, DENTAL, AND NUTRITIONAL FOLLOW-UP SERVICES:

Medication records, as well as dispensary and storage appeared to be well managed and safe. Nutritional needs are met at the group home through organized menu planning, shopping and meal preparation. Meals are served and eaten as family style. Special dietary needs are available upon assessment and planning of the facility nutritionist.

TREATMENT SERVICES (COUNSELING, GROUPS, THERAPY ETC):

The Clinical Services Department at Gibault is comprised of the Director of Clinical Services, the Supervisor of Clinical Services and professional therapists. Therapy continues to be conducted on a scheduled and routine basis through groups, family intervention, and individually. Students participate in individual therapy at least once a week.

STAFF ORIENTATION AND TRAINING HOURS:

Gibault continues to provide extensive trainings for all employees throughout the year. Along with the initial (48) hours of staff orientation training, there are the following mandated trainings: First Aid/ CPR, Therapeutic Crisis Intervention (every 6 months), Water Safety, Water Rescue, Emergency Preparedness, etc.

All training hours are documented in staff record logs and electronically in a data system. Review of staff's file revealed no issues regarding training hours. File reviews indicated that Gibault has met all training hours and requirements to meet California licensing standards.

SCOPE OF CERTIFICATION REVIEW:

Certification review covered the following areas: programming, intake and discharge procedures, disciplinary policy, emergency intervention techniques, medical procedures, staff and client file review, facility file review, staff interviews, observation of program and daily activities, criminal record review, personal rights, food services, staff trainings, emergency disaster plan, fire clearance, and all issues pertaining to physical plant.

OUT-OF-STATE CERTIFICATION FINDINGS, VIOLATIONS AND PLAN OF CORRECTIONS:

Develop a plan of correction (POC) and implementation process that clearly responds to the issues of the Annual Certification review. The POC shall include but not limited to the following elements:

1. Develop a plan to ensure that special incidents are reported within the specified time frames as described in the California Out-of-State Certification Reporting Guideline Requirements.

CERTIFICATION DECISION:

Re-Certification is to continue through June 2007. Please submit a POC for the above issues by **August 31, 2006** to:

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